

**SCHEDULE A (FEC Form 3)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 10 OF 90
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)
Beatty for Congress

Full Name (Last, First, Middle Initial) Jill K Frost		Date of Receipt M M / D D / Y Y Y Y 09 / 11 / 2014
Mailing Address 42 Latta Avenue		Transaction ID : C10091094
City Columbus	State OH	Zip Code 43205
FEC ID number of contributing federal political committee. C	Amount of Each Receipt this Period 50.00	
Name of Employer Information Requested	Occupation Information Requested	
Receipt For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 50.00	

Full Name (Last, First, Middle Initial) Patricia Gabbe		Date of Receipt M M / D D / Y Y Y Y 09 / 06 / 2014
Mailing Address 297 Stanbery Avenue		Transaction ID : C10056745
City Bexley	State OH	Zip Code 43209
FEC ID number of contributing federal political committee. C	Amount of Each Receipt this Period 250.00	
Name of Employer Nationwide Childrens Hospital	Occupation Pediatrician	
Receipt For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 1125.00	

Full Name (Last, First, Middle Initial) Kenneth Gaither		Date of Receipt M M / D D / Y Y Y Y 09 / 15 / 2014
Mailing Address 1900 Pelican Landing Blvd Apt 1011		Transaction ID : C10056742
City Clearwater	State FL	Zip Code 33762
FEC ID number of contributing federal political committee. C	Amount of Each Receipt this Period 250.00	
Name of Employer HSN	Occupation Vice President	
Receipt For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 250.00	

SUBTOTAL of Receipts This Page (optional).....	550.00
TOTAL This Period (last page this line number only).....	